Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Lori Chavez-DeRemer for Congress 11805 SE Eastbourne Lane ADDRESS (number and street) (Check if address is changed) Happy Valley OR 97086 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS info@lorichavezderemer.com (Check if address is changed) Optional Second E-Mail Address loripiercy@centurylink.net COMMITTEE'S WEB PAGE ADDRESS (URL) www.LoriChavezDeRemer.com (Check if address is changed) DATE 2021 C00784520 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Chavez-DeRemer, Lori, , , Type or Print Name of Treasurer Chavez-DeRemer, Lori,,, [Electronically Filed] Date 10 2022 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

FEC Form 1 (Re	vised 03/2022)	Page 2
TYPE OF CO	DMMITTEE:	
Candidate	Committee:	
(a) X This	s committee is a principal campaign committee. (Complete the candidate informatio	n below.)
1 1	s committee is an authorized committee, and is NOT a principal campaign committer	ee. (Complete the candidate
Name of Candidate	Chavez-Deremer, Lori, , ,	
Candidate Party Affilia	office Sought: House Senate	State OR President District 05
(c) This	s committee supports/opposes only one candidate, and is NOT an authorized comm	nittee.
Name of Candidate		
Party Comi	mittee: s committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Ac	tion Committee (PAC):	
(e) This	s committee is a separate segregated fund. (Identify connected organization on line	6.) Its connected organization is a
_ п	Corporation Corporation w/o Capital Stock	Labor Organization
H		=
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
1.1	s committee supports/opposes more than one Federal candidate, and is NOT a semittee. (i.e., nonconnected committee)	parate segregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This	s committee is an independent expenditure-only political committee (Super PAC).	
(6)	In addition, this committee is a Lobbyist/Registrant PAC.	
(b) This	s committee is a political committee with both contribution and non-contribution acc	ounts (Hybrid PAC)
(h) This		ounts (Hybrid FAC).
	In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fund	raising Representative:	
(i) This	s committee collects contributions, pays fundraising expenses and disburses net pro nmittees/organizations, at least one of which is an authorized committee of a federa	·
(1)	s committee collects contributions, pays fundraising expenses and disburses net pro nmittees/organizations, none of which is an authorized committee of a federal candi	·
Committee	es Participating in Joint Fundraiser	
1.	(

	FEC Form 1 (Revised 0	2/2009)			Page 3
V	I ori Chavez-De	eRemer for Congre	2SS		
6.	Name of Any Connected Or	rganization, Affiliated Committee,	Joint Fundraising Repr	resentative, or Leade	rship PAC Sponsor
	Mailing Address	PO BOX 23696			
		TIGARD		OR 97281	
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organiza	tion x Joint Fundraising	g Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi	fy by name, address (phone numbe	r optional) and position (of the person in posses	ssion of committee
	Piercy, Lori	,,,			
	Full Name				
	Mailing Address	29993 Maple Drive			
		Rainier		OR 97048	·
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Asst. Treasurer		Telephone nur	mber 503 - [816 7131
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number option assistant treasurer).	nal) of the treasurer of the	e committee; and the	name and address of
	Full Name Chavez-De	Remer, Lori, , ,			
		11805 SE Eastbourne Lane			
	Mailing Address				
		Happy Valley		OR 97086	
	Title or Position ▼	CITY ▲		STATE ▲	ZIP CODE ▲
	THE OF FOSITION ▼	I		. 503	732 0334
			Telephone nur	mber Liju-	

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent	Piercy, Lori, , ,	1 1 1 1 1 1 1 1	
Mailing Address	29993 Maple Drive		
	Rainier	OR 97048	
	CITY ▲	STATE ▲	ZIP CODE ▲
Title or Position \	•		
Asst. Treasurer	Telephone nu	mber 503 - [816 7131
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the commit ces or maintains funds.	tee deposits funds, holo	ds accounts, rents
Name of Bank, D	epository, etc.		
	Columbia Bank		
Mailing Address	15820 SE Happy Valley Town Ctr Dr		
	Happy Valley	OR 97086	
	CITY A	STATE ▲	ZIP CODE ▲
Name of Bank, D	epository, etc.		
	Evolve Bank & Trust		1
Mailing Address	301 Shoppingway Blvd		
	West Memphis	AR 72301	
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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5(a)	or(h). Joint Fundraisin	a Participant		
J(g)	1	<u> </u>	FEC ID number	C
	2.		FEC ID number	C
			FEC ID number	C
	3.			
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra 05 REPUBLICAN NOMINEE FUND 2		e, or Leadership PAC Sponsor
	Mailing Address	PO Box 30844		
		Bethesda	MD	20824
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization X Affiliated Committee Joint	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Full Name Mailing Address			
	Mailing Address	CITY A	STATE A	ZIP CODE A
		•	STATE A lephone Number	ZIP CODE A
	Mailing Address	•	1	ZIP CODE A
9.	Mailing Address TITLE OR POSITION	ries: List all banks or other depositories in which	lephone Number	
9.	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or maintain the safety deposit boxes or m	ries: List all banks or other depositories in which	lephone Number	
9.	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or mail Name of Bank, Umpqu	ries: List all banks or other depositories in which saintains funds.	lephone Number	
9.	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main that the safety deposit boxes or main that the safety depository, etc.	ries: List all banks or other depositories in which aintains funds. Ja Bank	lephone Number	
9.	Mailing Address TITLE OR POSITION Banks or Other Deposito safety deposit boxes or main that the safety deposit boxes or main that the safety depository, etc.	ries: List all banks or other depositories in which aintains funds. Ja Bank	lephone Number	

FEC Form 1S (Revised 02/2017)

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or(h). Joint Fundraisin	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
7.			
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Sponsor
LORI CHAVEZ-DI	EREMER VICTORY		
Mailing Address	PO BOX 23696		
	TIGARD	OR OR	97281
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	loint Fundraising Represent	ative Leadership PAC Sponsor
Full Name	by name, address (phone number – optional		
Mailing Address			
	1		
			I I-I
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
		Telephone Number	
safety deposit boxes or ma		ich the committee deposit	s funds, holds accounts, rents
Name of Bank, Chain Depository, etc.	Bridge Bank		
Mailing Address	1445-A Laughlin Ave		
	McLean	VA	22101
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

CITY A CITY A CITY A CITY A CITY A	h). Joint Fundraisi r	g Participant:		
CITY A CITY A CITY A CITY A CITY A	1.		FEC ID number	С
CITY A CITY A CITY A CITY A CITY A	2.		FEC ID number	С
CITY A CITY A CITY A CITY A CITY A	3.		FEC ID number	С
CITY A CITY A CITY A CITY A CITY A	4.		FEC ID number	С
CITY A Affiliated Committee Iress (phone number – committee)	ame of Any Connected JERRY CARL CA	Organization, Affiliated Committee, Joint Fun	ndraising Representativ	e, or Leadership PAC Spon
CITY A Affiliated Committee Iress (phone number – committee) CITY A				
CITY A Affiliated Committee Iress (phone number – committee) CITY A				
Affiliated Committee	Mailing Address	PO BOX 852138		
Affiliated Committee				
Affiliated Committee		MOBILE	AL	36685
Iress (phone number – c	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
			oint Fundraising Represent	ative Leadership PAC Sp
		d Organization Affiliated Committee Joy Joy by name, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
	esignated Agent: Identif		oint Fundraising Represent	ative Leadership PAC Sp
	esignated Agent: Identif		oint Fundraising Represent	ative Leadership PAC Sp
nks or other depositories	esignated Agent: Identif	y by name, address (phone number – optional)		
nks or other depositories	esignated Agent: Identif	y by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Sp
(esignated Agent: Identif	y by name, address (pho	one number – optional)	one number – optional)
	y t	by name, address (phone number – optional) CITY CITY es: List all banks or other depositories in which that its funds.	Te	STATE A
	ignated Agent: Identification Full Name Mailing Address TITLE OR POSITION ks or Other Deposited ty deposit boxes or mainly deposit boxes or mainly deposit boxes or mainly deposit boxes.	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which aintains funds. Fargo Bank	STATE A Telephone Number	ZIP CODE
	Full Name Mailing Address TITLE OR POSITION Inks or Other Deposite The position of Bank, wells pository, etc.	y by name, address (phone number – optional) CITY CITY ries: List all banks or other depositories in which aintains funds. Fargo Bank	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.			
		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spor
NRCC OREGON	VICTORY		
<u> </u>			
Mailing Address	320 1ST STREET, SE		
	WASHINGTON	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	y by name, address (phone number – optional)		
Mailing Address			
		07475	710.0005
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	•	STATE Telephone Number	ZIP CODE A
anks or Other Deposito fety deposit boxes or ma	ries: List all banks or other depositories in which	Telephone Number	
anks or Other Deposito fety deposit boxes or ma ame of Bank, epository, etc.	ries: List all banks or other depositories in which	Telephone Number	
	ries: List all banks or other depositories in which	Telephone Number	

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). Joint Fundraising	•		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
		Fundraising Represents	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY		
esignated Agent: Identify Full Name	by name, address (phone number – optional) CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	by name, address (phone number – optional) CITY CITY Tes: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). Joint Fundraisin ç	g Participant:			
	1		FEC II	D number	C
	2.		FEC II	D number	C
	3.		FEC II	D number	C
	4.		FEC II	D number	C
6.	Name of Any Connected NORTHWEST PR	Organization, Affiliated Committee, Joint Fu	ndraising Re	presentativ	e, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON ST			
		STE 115			
		ALEXANDRIA		_ VA _ ⊥	22314
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	oint Fundraisin	g Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify Full Name	by name, address (phone number – optional)		
	Mailing Address				
	Manning / taurooc				
				1 1	
		CITY _		STATE A	ZIP CODE A
	TITLE OR POSITION	▼			1 1 1 1
			Telephone N	lumber	
9.	Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	ies: List all banks or other depositories in whintains funds.	ich the comm	ittee deposit	s funds, holds accounts, rents
	Mailing Address	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 1 1 1	1 1 1 1	
	ivialility Address				
		CITY A		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017) form

*					
5(g) or	(h). Joint Fundraisin	g Participant:			
	1	<u> </u>	FEC	ID number	C
	2.	<u> </u>	FEC	ID number	C
	3.		FEC	ID number	C
	4.		FEC	ID number	C
-					
6. N		Organization, Affiliated Committee, Join N WINGMAN FUND	it Fundraising н	epresentative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 2811	<u> </u>		1
			·		
		LAKELAND		FL	33806
	Relationship:	CITY A		STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	X Joint Fundrais	ing Representa	Leadership PAC Sponsor
3. D	Designated Agent: Identify Full Name	by name, address (phone number – opti	onal)		
	Mailing Address	1		· · · · ·	
	···				
				1 . 1	1
		CITY _		STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	1	Talanhana		 1 <u>-</u> 1 1 <u>-</u> 1
_			Telephone	Number	
s	Banks or Other Depositor afety deposit boxes or main large of Bank, Depository, etc.	ries: List all banks or other depositories in intains funds.	n which the com	mittee deposits	s funds, holds accounts, rents
	Mailing Address				
		CITY ▲		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

h). Joint Fundraisi	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
GOP WINNING V	VOMEN-FLORIDA		
	228 S. WASHINGTON ST.		
Mailing Address	STE. 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	t Fundraising Representa	
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esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Depositor	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposited deposit boxes or market deposit boxes or market deposit boxes.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A